FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
			=	
ADDRESS (number and stree	1325 G Street, N.W.			
(Check if address is changed)				
	Washington └──└──└──└── CITY ▲		DC STATE ▲	20005
COMMITTEE'S E-MAIL ADD	DRESS			
(Check if address is changed)	awilliams@bampac.org			
	Optional Second E-Mail Ad brady@ivom.org	ldress		
(Check if address is changed)				
2. DATE 09 /	21 / Y Y Y Y 2017			
3. FEC IDENTIFICATION	NUMBER ► C C	00300921		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examine Type or Print Name of Treas	d this Statement and to the best surer <u>Buckner, Brady, J, ,</u>	of my knowledge and belief i	t is true, correct a	and complete.
Signature of Treasurer E	uckner, Brady, J, ,		Date 06	/ D D / Y Y Y Y 13 2024
NOTE: Submission of false, en	roneous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing TION SHOULD BE REPORTED		
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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5. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complein information below.)	ete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
(d) This committee is a	ocratic, olican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is a:
Corporation Corporation w/o Capital Stock	bor Organization
Membership Organization Trade Association Co	ooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hyb	rid PAC).

Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser
1.
2.

In addition, this committee is a Lobbyist/Registrant PAC.

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

BLACK AMERICA'S POLITICAL ACTION COMMITTEE

Name of Any Connected	U1	gai			•••									, c							5						, .		 				U	Οp	011		
Mailing Address																																					
			1																					L				L					-				
										C	л	Y.												ST	ATI					2	ZIP	С	DC	θE			
Relationship: Connecte	ed C	Draa	aniz	zatio	on	Ē	٦	Affil	iate	ьe	Or	'na	niz	atic	'n	i.	1	lo	nt	Fu	ndr	aisi	ina	Re	nre	ser	ntati	ve		1.	ad	ers	hin	P/	AC	Sp	ons

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Buckner, B	ady, J, ,
Full Name	
Mailing Address	1325 G Street, NW
	Suite 500
	Washington DC 20005
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 202 - 680 - 4749

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Buckner, Brady, J, ,
Mailing Address	1325 G Street, NW
	Suite 500
	Washington DC 20005
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image:

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Full Name of Designated Agent	Buckner, Brady, J, ,
Mailing Address	1325 G St. NW
	Washington DC 20005 Image: I
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image: Telephone number 202 - 680 - 4749

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells	Fargo Bank		
Mailing Address	2000 L Street		
	Washington		2
	CITY A	STATE A	ZIP CODE
Name of Bank, Deposito	ry, etc. Virginia Bank		
Mailing Address	11325 Random St.		
	Fairfax 	VA 22030	
	CITY A	STATE A	ZIP CODE